

DHHS HIGHLIGHTS

Assembly Health and Human Services

February 4, 2015

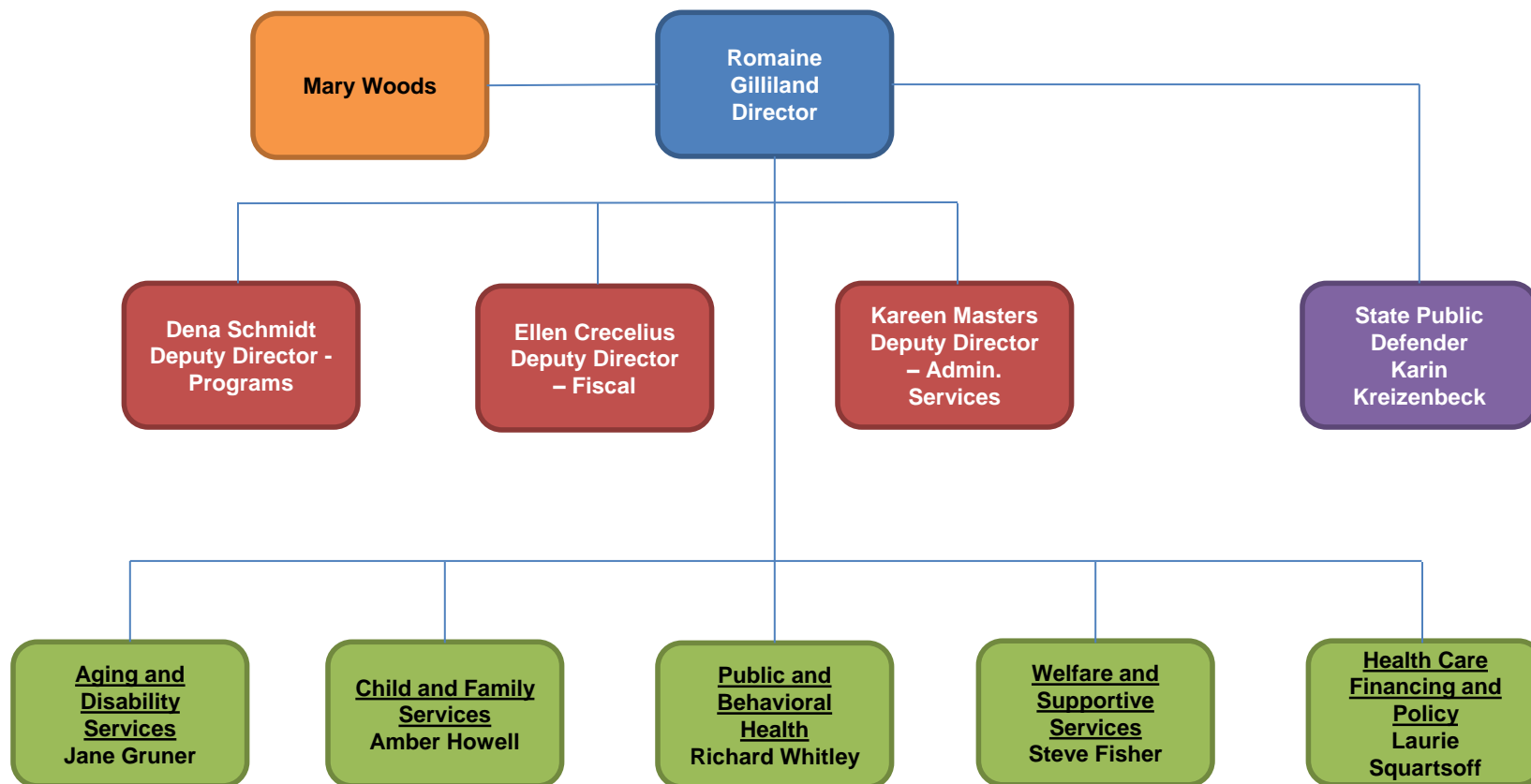
Romaine Gilliland,
DHHS Director

DHHS's Mission

- The Department of Health and Human Services (DHHS) promotes the health and well-being of Nevadans through the delivery of essential services to ensure families are strengthened, public health is protected, and individuals achieve their highest level of self-sufficiency.
- The department consists the following divisions: Aging and Disability Services, Child and Family Services, Health Care Financing and Policy, Public and Behavioral Health, Welfare and Supportive Services, and the Public Defender's Office.
- Statutory Authority: NRS 232.290-465.

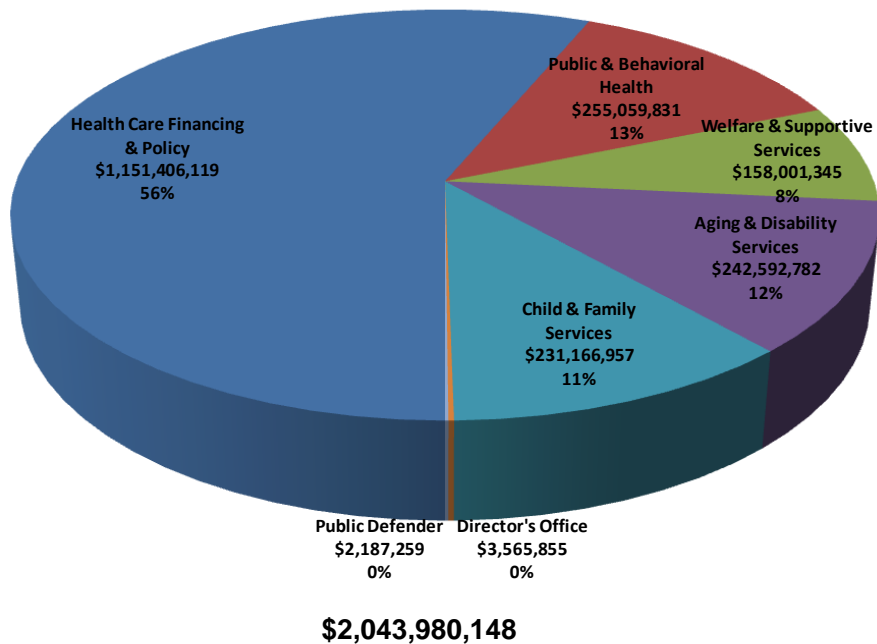
Helping People. It's who we are and what we do.

DHHS Organizational Chart

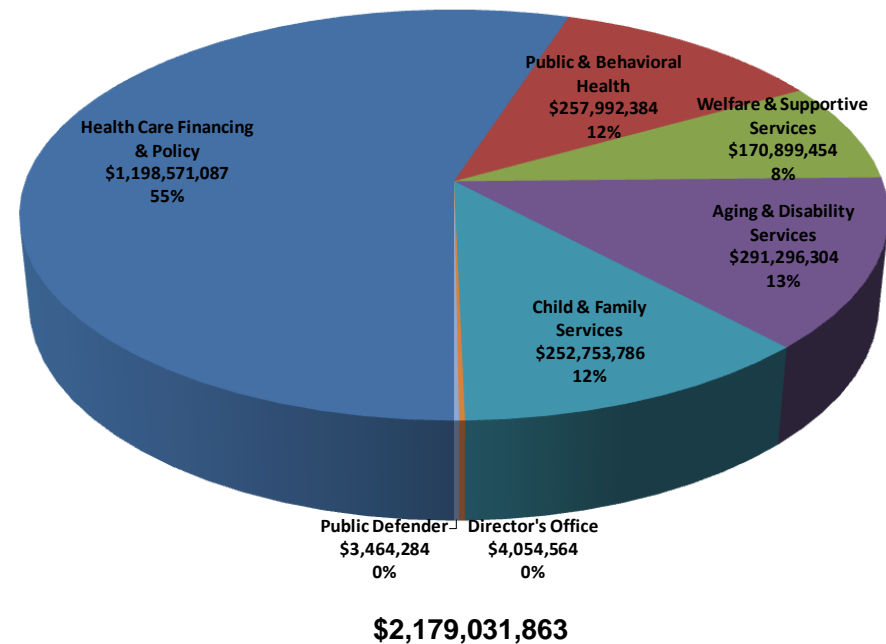


General Funds by Division, 2014-15 and 2016-17 Biennia

Legislative Approved General Funds 2014-15 Biennium



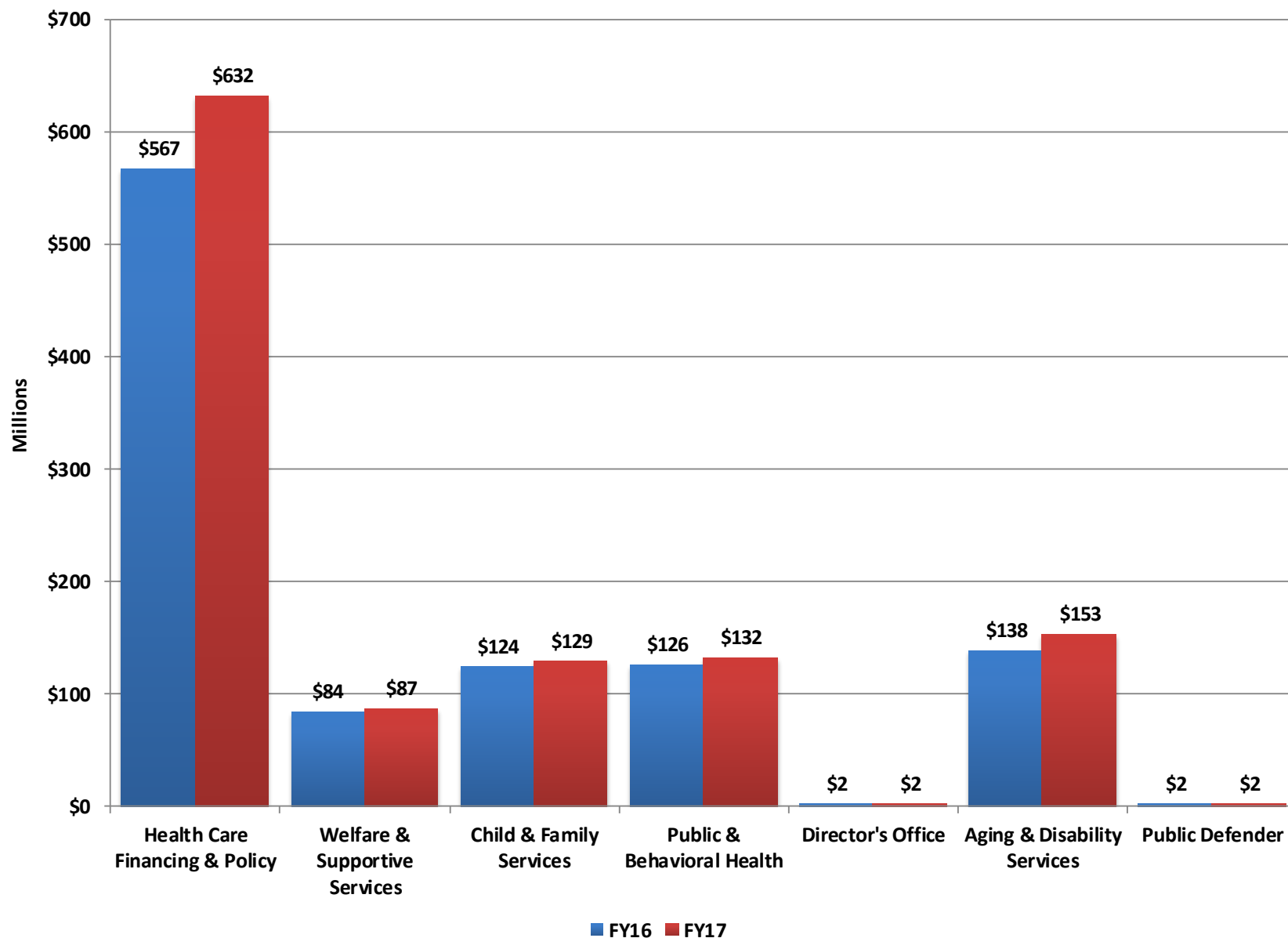
Governor's Recommended General Funds 2016-17 Biennium



CHANGE FROM 2014-15 BIENNIUM

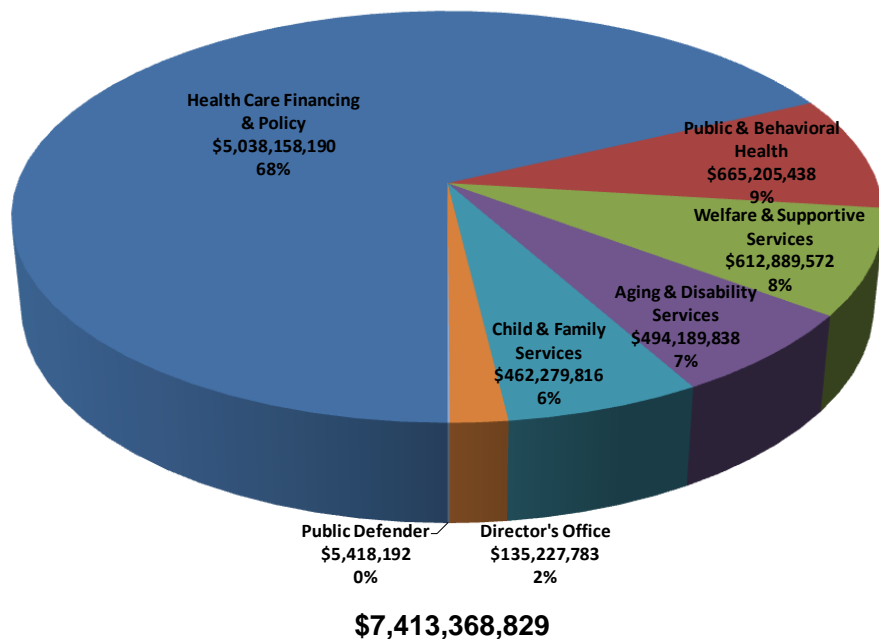
Expenditure Type	General Fund
Caseload (M200s)	\$182,440,477
Mandates (M500s)	-\$2,324,195
Rates	\$34,684,962
New Staff (not Caseload or Mandate)	\$5,803,300
TIRs (E550s)	\$3,449,452
Major Budget Initiatives	\$53,569,326
Other	-\$142,571,607
Change from 2014-15 Biennium	\$135,051,715

General Funds by Division, Fiscal Years 2016 and 2017

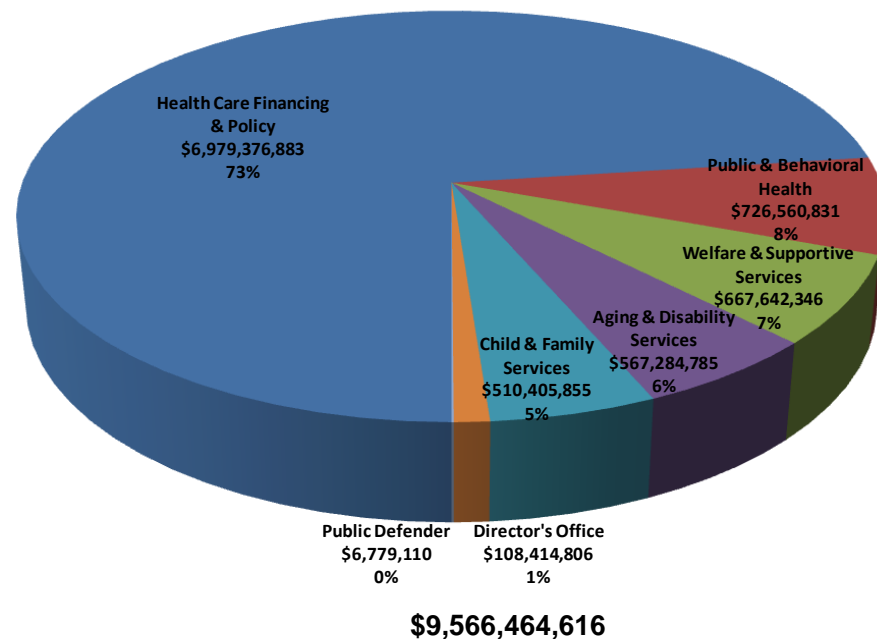


Revenues by Division, 2014-15 and 2016-17 Biennia

Legislative Approved 2014-15 Biennium

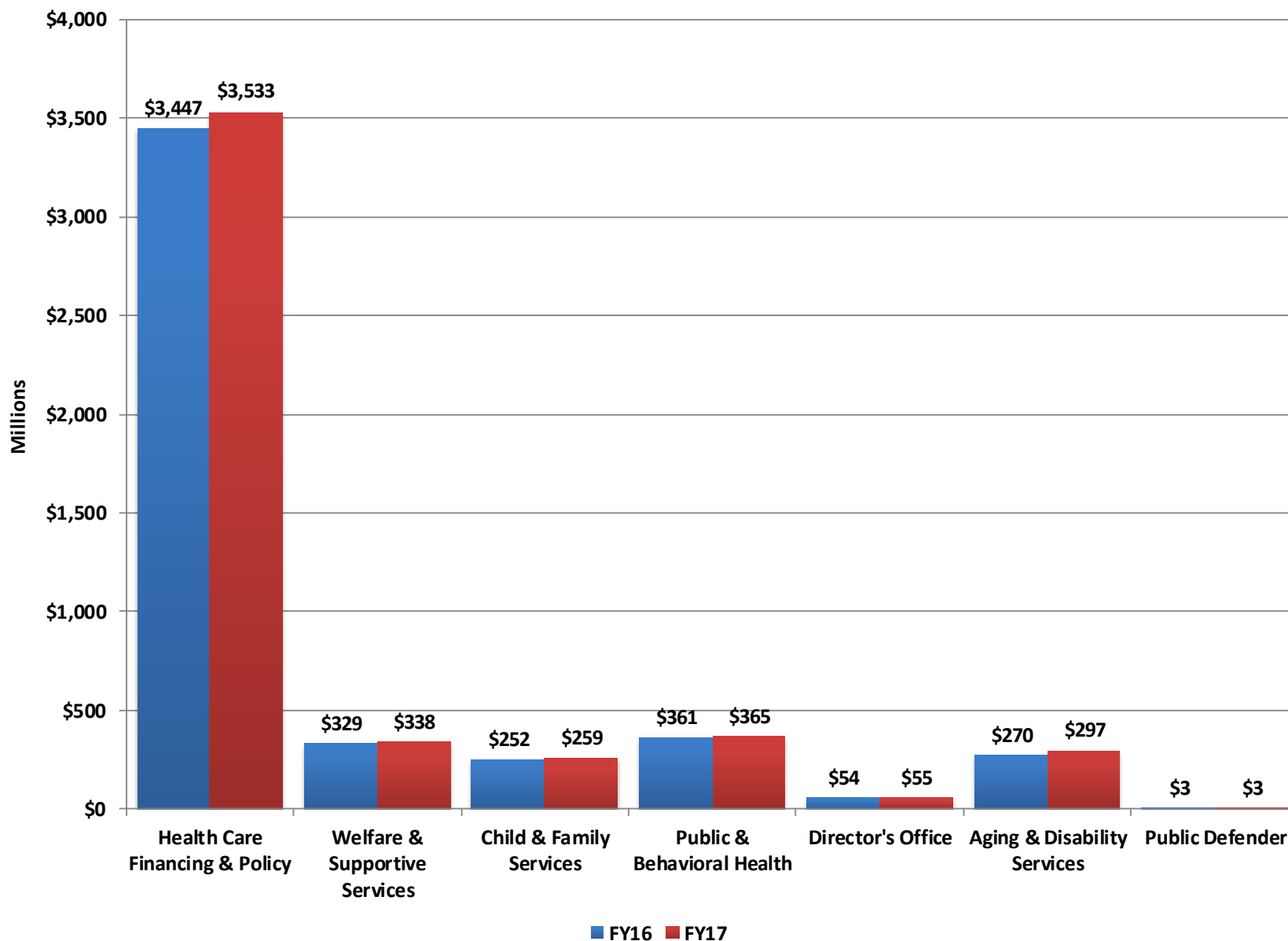


Governor's Recommended 2016-17 Biennium



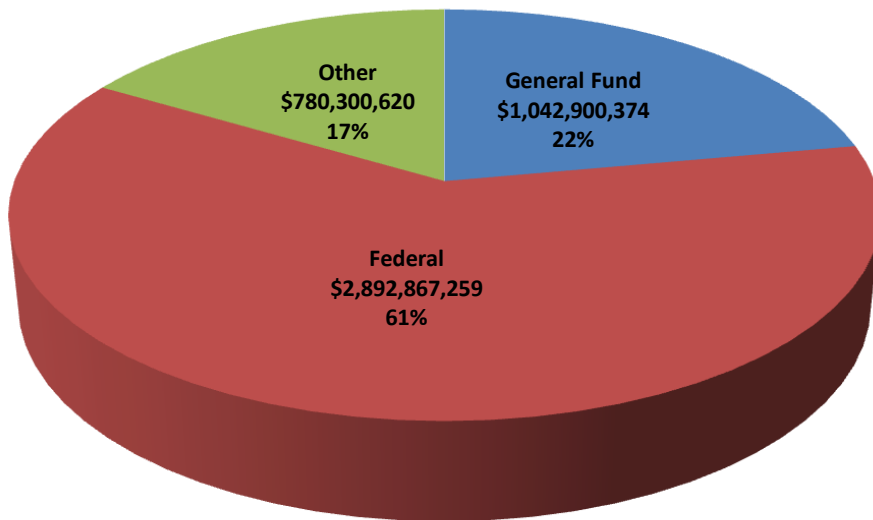
CHANGE FROM 2014-15 BIENNIUM	
Expenditure Type	Total
Caseload (M200s)	\$1,406,747,491
Mandates (M500s)	-\$7,196,374
Rates	\$134,250,470
New Staff (not Caseload or Mandate)	\$7,620,966
TIRs (E550s)	\$34,588,637
Major Budget Initiatives	\$95,734,315
Other	\$420,974,421
Change from 2014-15 Biennium	\$2,092,719,926

Revenues by Division, Fiscal Years 2016 and 2017



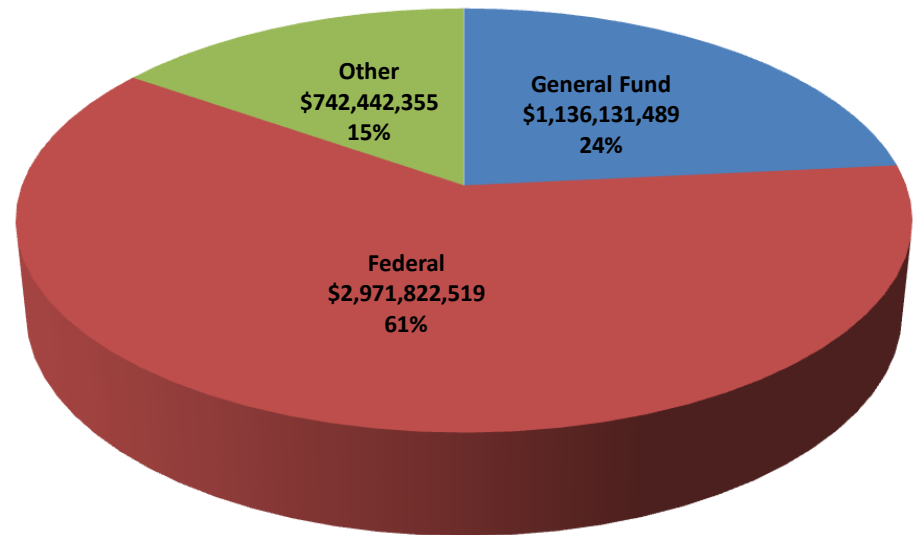
Budgeted Funding Sources, Fiscal Years 2016 and 2017

State Fiscal Year 2016



\$4,716,068,259

State Fiscal Year 2017



\$4,850,396,363

Blended FMAP for Fiscal Years 2003 - 2020

State Fiscal Year	FMAP	Enhanced (CHIP) FMAP	ACA Enhanced (CHIP) FMAP	New Eligibles FMAP
FY03	51.79%	66.25%		
	52.53%	66.77%		
FY04	54.30%	68.01%		
	55.34%	68.74%		
FY05	55.66%	68.96%		
FY06	55.05%	68.53%		
FY07	54.14%	67.90%		
FY08	52.96%	67.07%		
FY09	50.66%	65.46%		
	61.11%	72.78%		
FY10	50.12%	65.08%		
	63.93%	74.75%		
FY11	51.25%	65.87%		
	62.05%	70.44%		
FY12	55.05%	68.54%		
FY13	58.86%	71.20%		
FY14	62.26%	73.58%		100.00%
FY15	64.04%	74.83%		100.00%
FY16	64.79%	75.35%	92.60%	100.00%
FY17	65.30%	75.71%	98.71%	97.50%
FY18	65.71%	76.00%	99.00%	94.50%
FY19	65.68%	75.98%	98.98%	93.50%
FY20	65.23%	75.66%	81.41%	91.50%

KEY AREAS OF FOCUS, ACCOMPLISHMENTS, AND MAJOR BUDGET INITIATIVES

Key Areas of Focus

- Timely, Accurate and Cost Effective Service Delivery and Case Management, and Access to Health Care
- Behavioral Health and Wellness
- Maximize Medicaid Federal Fund Participation, Innovation and Optimization
- Food Security – SNAP and WIC

Accomplishments

- Eligibility Case Processing

- Timeliness
- Process Reengineering
- Lobby Management
- Call Center Enhancements

- Uninsured Rate

- Mid-2013 Uninsured rate was 23%
- Today 11% Uninsured

- Medicaid Expansion

- Projected 147,000 newly eligible
- ACA and expansion coverage increase of 300,000 Nevadans
- Enhance behavioral health services

- Managed Care

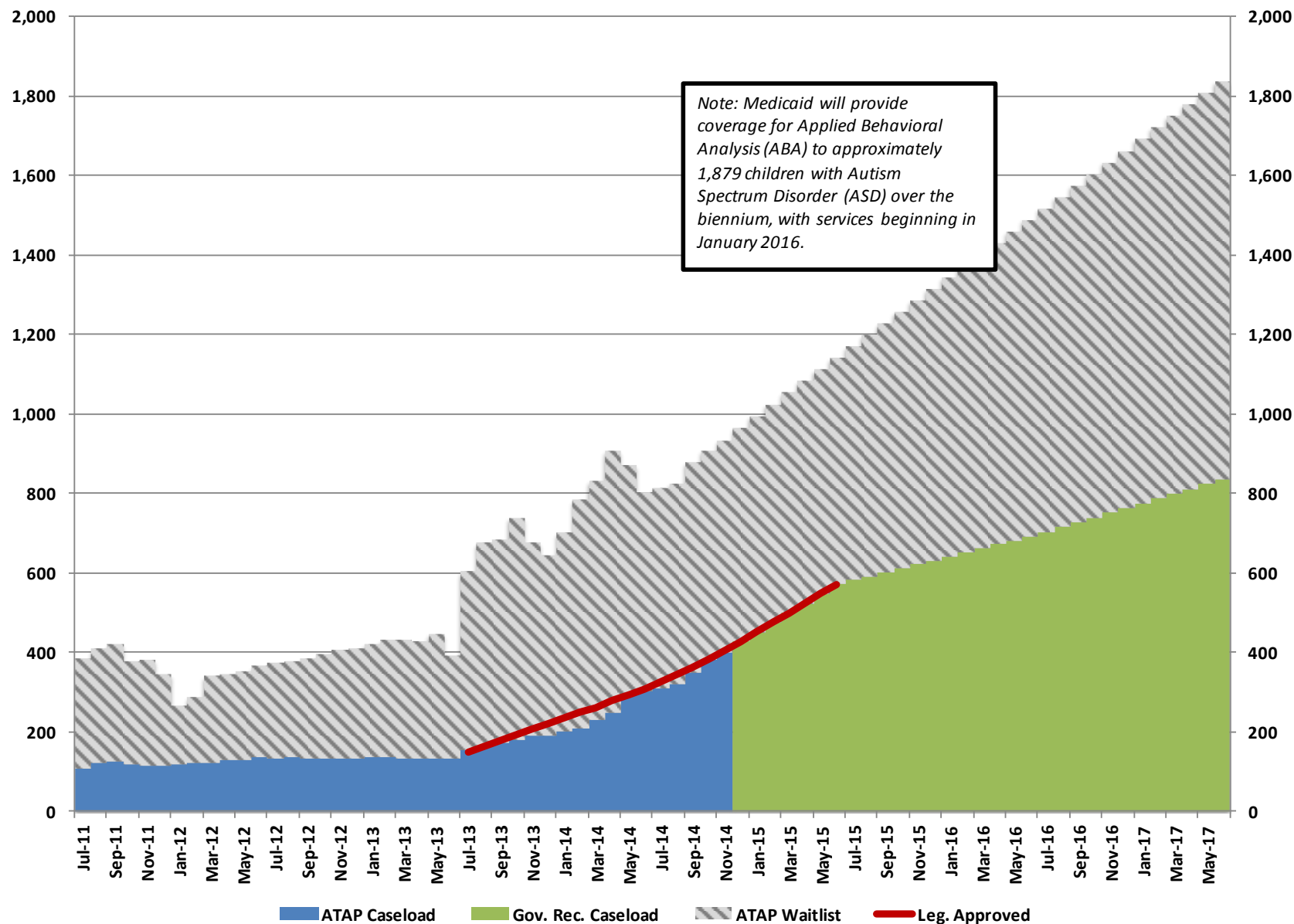
- 74% Medicaid Clients receive managed care services
- 50% of behavioral health patients known to DPBH receive managed care services

MAJOR BUDGET INITIATIVES

Children with Autism Spectrum Disorder (ASD)

- ASD impacts 1 in every 68 children.
- Over 6,000 children in Nevada have been diagnosed with ASD.
- The Aging and Disability Services Division administers the **Autism Treatment Assistance Program** (ATAP). The budget includes funding for ADSD to serve an additional 264 children over the biennium, increasing the caseload to 836 children by the end of FY17
- The Centers for Medicare and Medicaid Service (CMS) released guidance on behavior intervention services as a mandate for children with ASD effective July 7, 2014. Although Nevada Medicaid meets the coverage requirements for physical, speech, occupational therapy, and habilitative services for this diagnostic population, **Applied Behavioral Analysis** (ABA) services have not been covered to date. The Division of Health Care Financing and Policy plans to provide coverage for ABA services to approximately 1,879 children over the biennium, beginning in January 2016.
- MBI Funding = \$61.8 million, 2 FTE
- Total Funding for Services = \$73 million

Autism Treatment Assistance Program (ATAP)



Stein Hospital

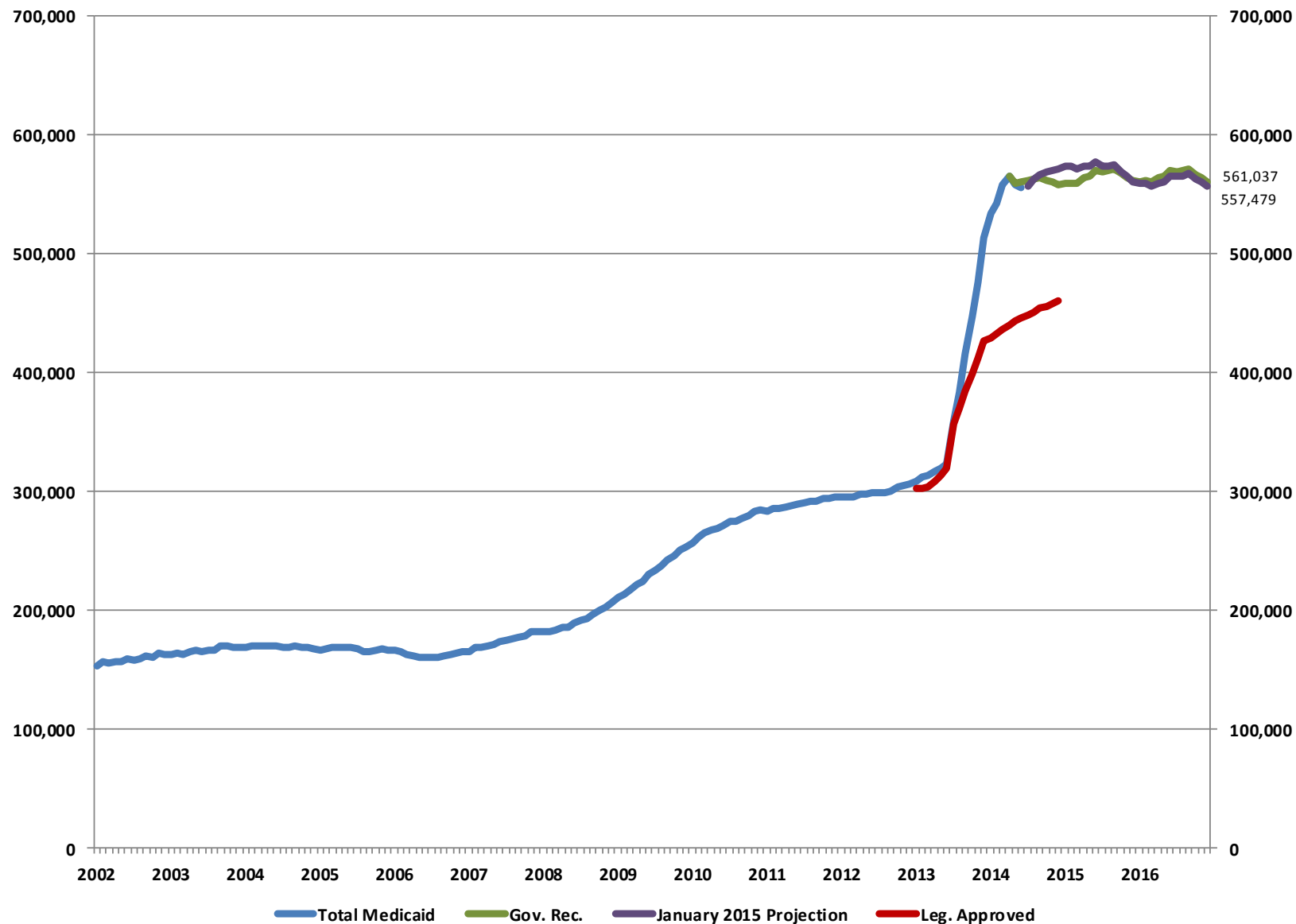
- This initiative funds positions, contracted staff, and associated operating costs related to the **expansion of state forensic behavioral health services**.
- The 2013 Legislature approved funds to remodel the Stein Hospital and provide additional forensic behavioral health beds in Southern Nevada. Because Stein Hospital was originally constructed as a civil hospital, it is necessary to provide extensive security upgrades to ensure that individuals in custody are appropriately maintained in that status. The remodel is scheduled to be completed in September 2015.
- A federal lawsuit was settled with a consent decree that included expanding forensic bed capacity in Southern Nevada by 47 beds at the Stein Hospital. The lawsuit was precipitated by an increasing length of stay in jails by defendants awaiting evaluation or treatment for competency and was filed by the Clark County Public Defender's Office.
- MBI Funding = \$20,703,121, 154.02 FTE

Specialized Foster Care

- During the last biennium, the Division of Child and Family Services (DCFS) implemented a pilot program in an effort to provide the most effective and appropriate services for children in foster care with severe behavioral and emotional problems, and to provide these services within their own communities.
- *Southern Pilot: (Clark County)*
 - Hospitalizations: decrease of 31%
 - Placement Disruptions: decrease of 53%
 - Psychotropic Med usage: decrease of 29%
- *Northern Pilot: (Rural and Washoe Counties)*
 - Hospitalizations: decrease of 100%
 - Placement Disruptions: decrease of 93%
 - Psychotropic Med usage: decrease of 37.5%
- MBI Funding = \$13,205,911, 10 FTE

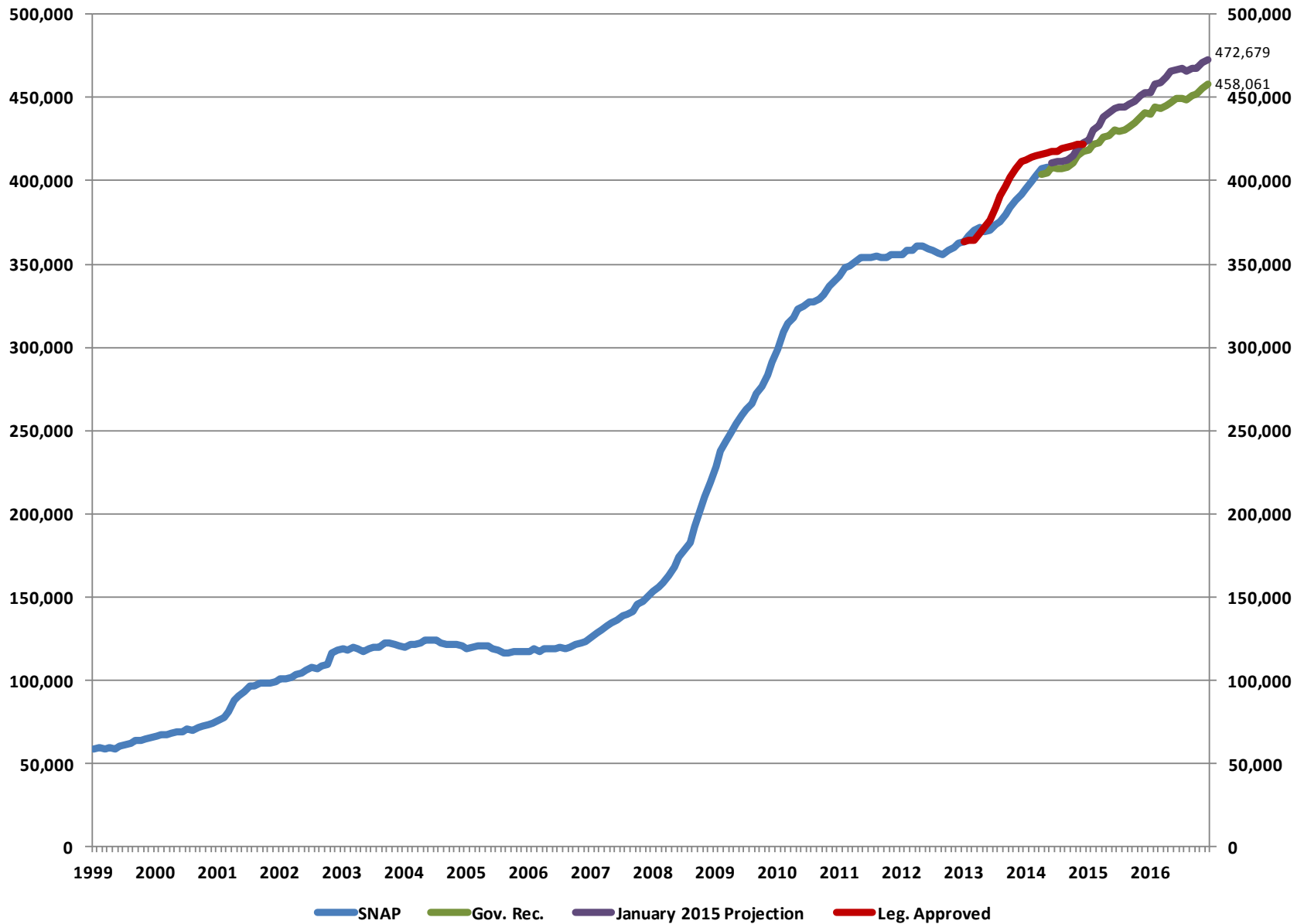
CASELOADS

Total Medicaid Recipients

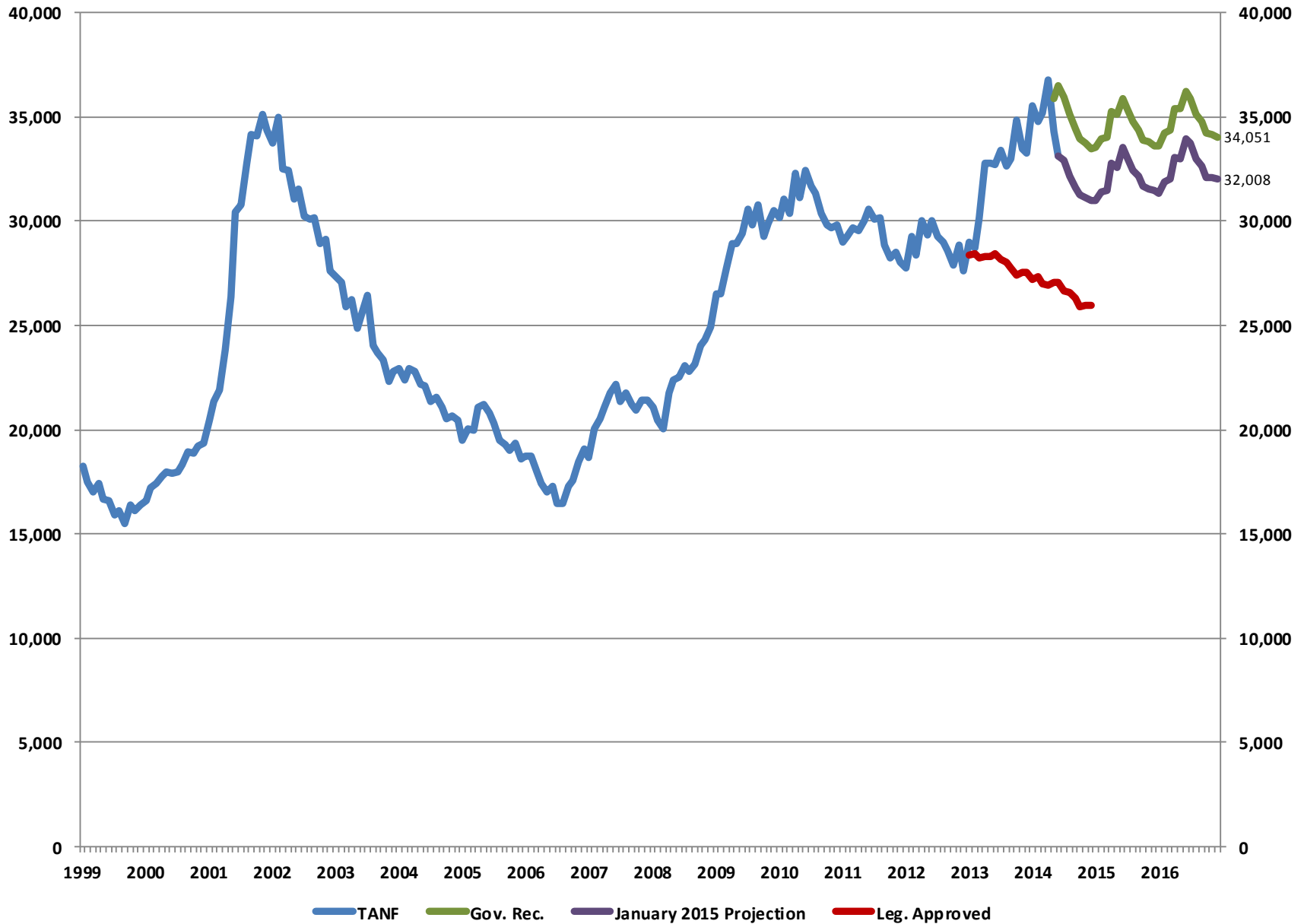


Note: This chart was created for DWSS staffing purposes and includes DWSS waiver caseload counts. For this reason, the total caseload differs slightly from that used by DHCFP for the budget.

SNAP

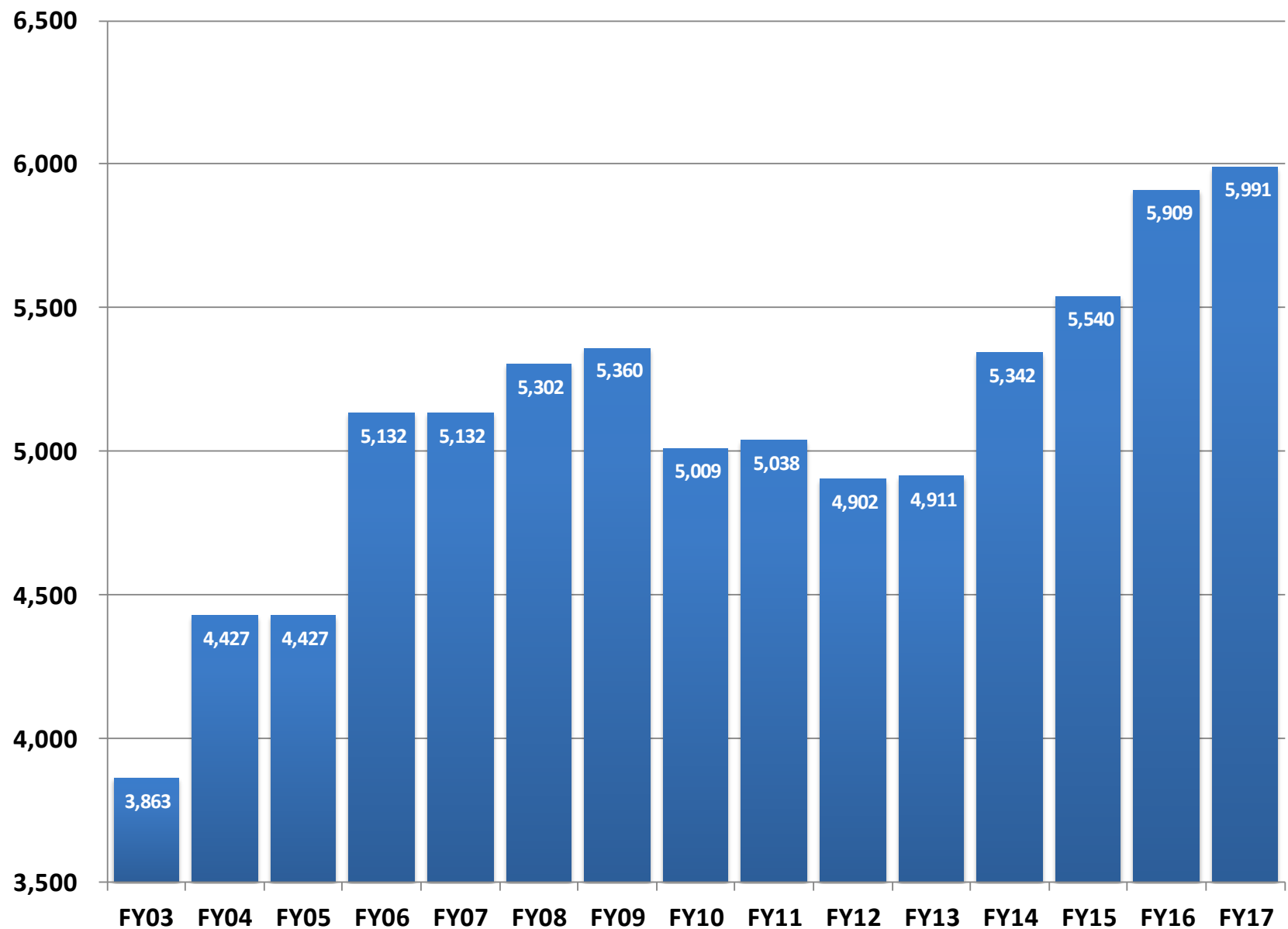


TANF Cash

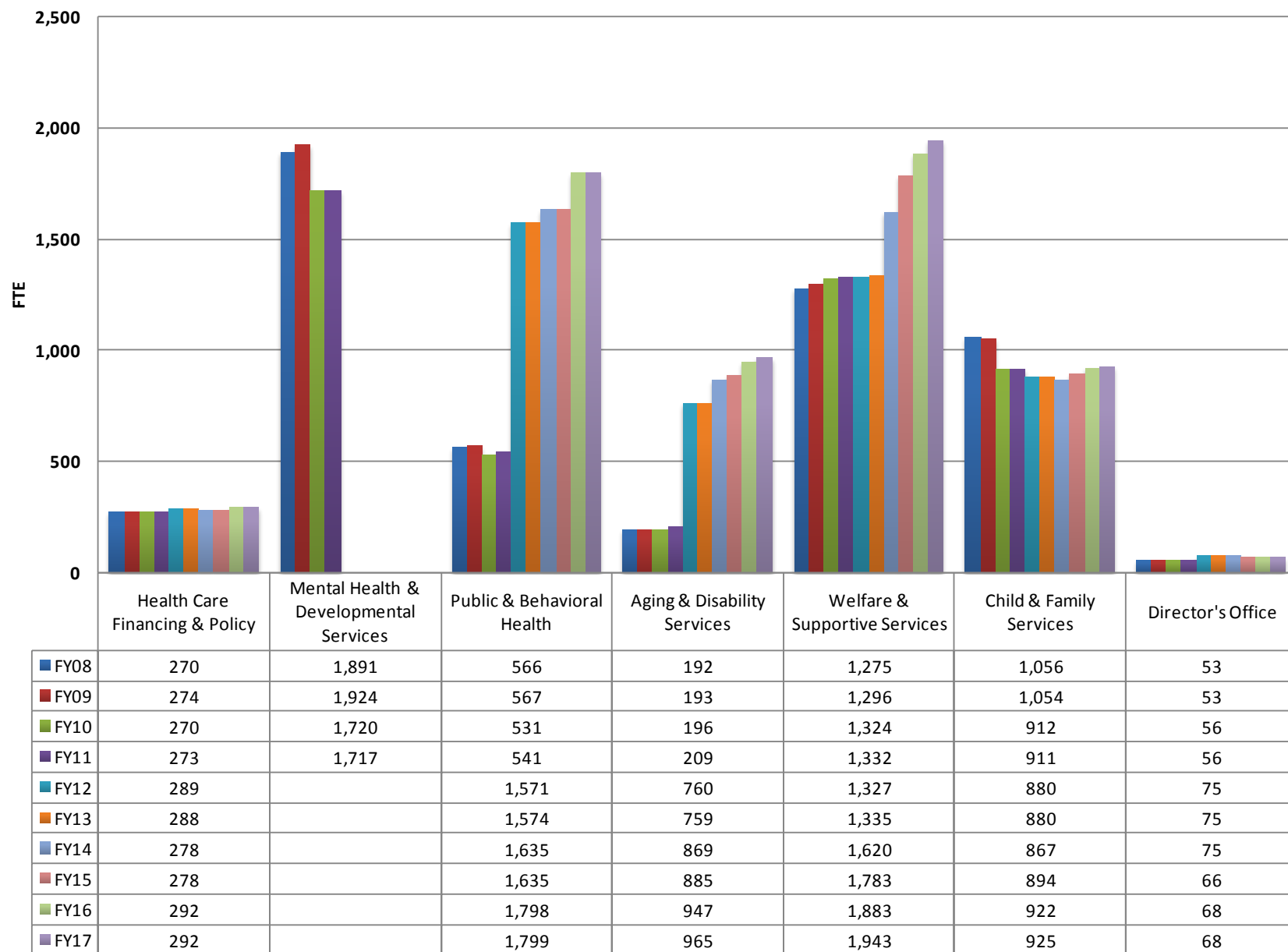


FTE

Total DHHS FTE, Fiscal Years 2003 - 2017

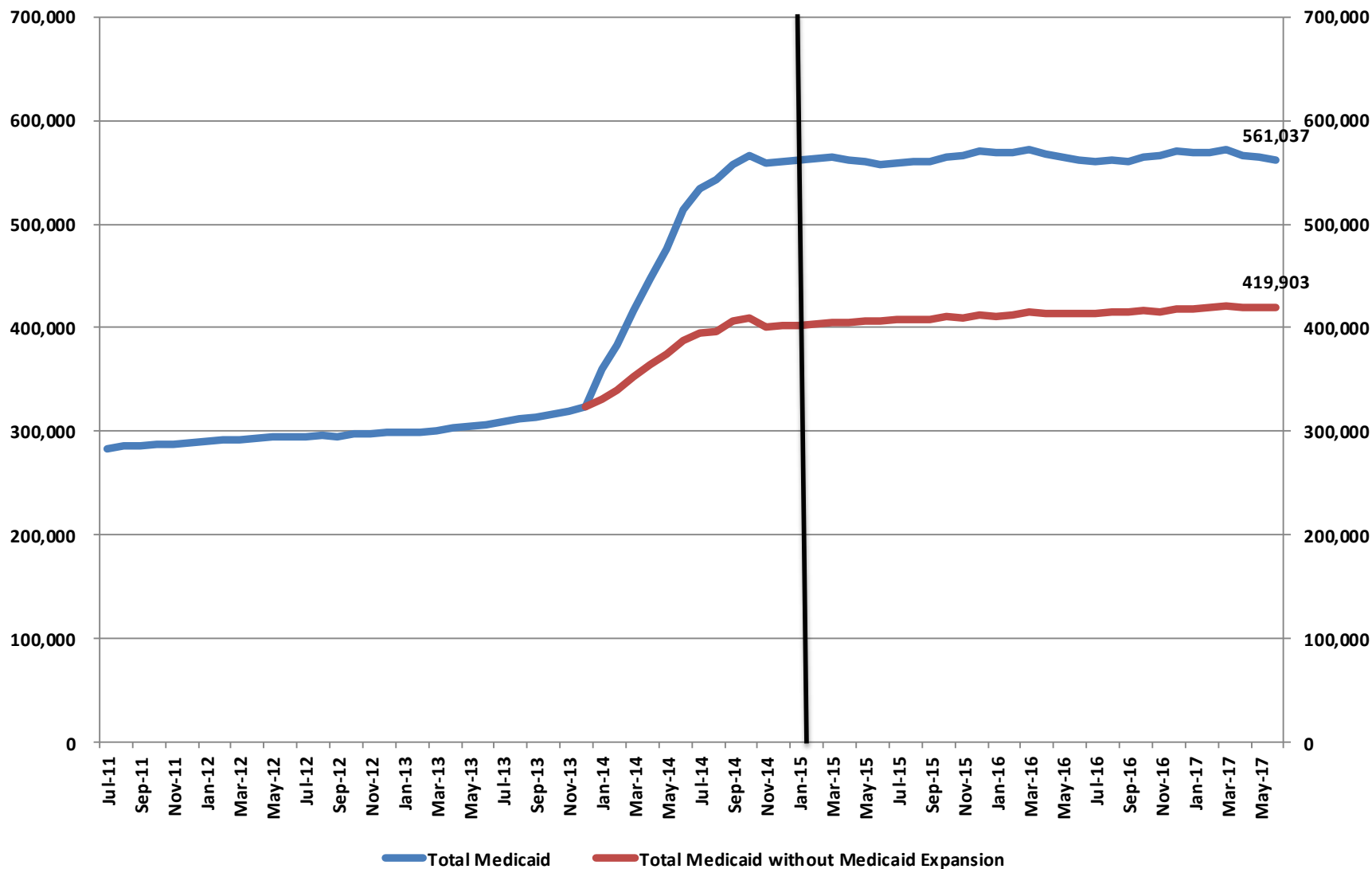


FTE by Division, Fiscal Years 2016 and 2017



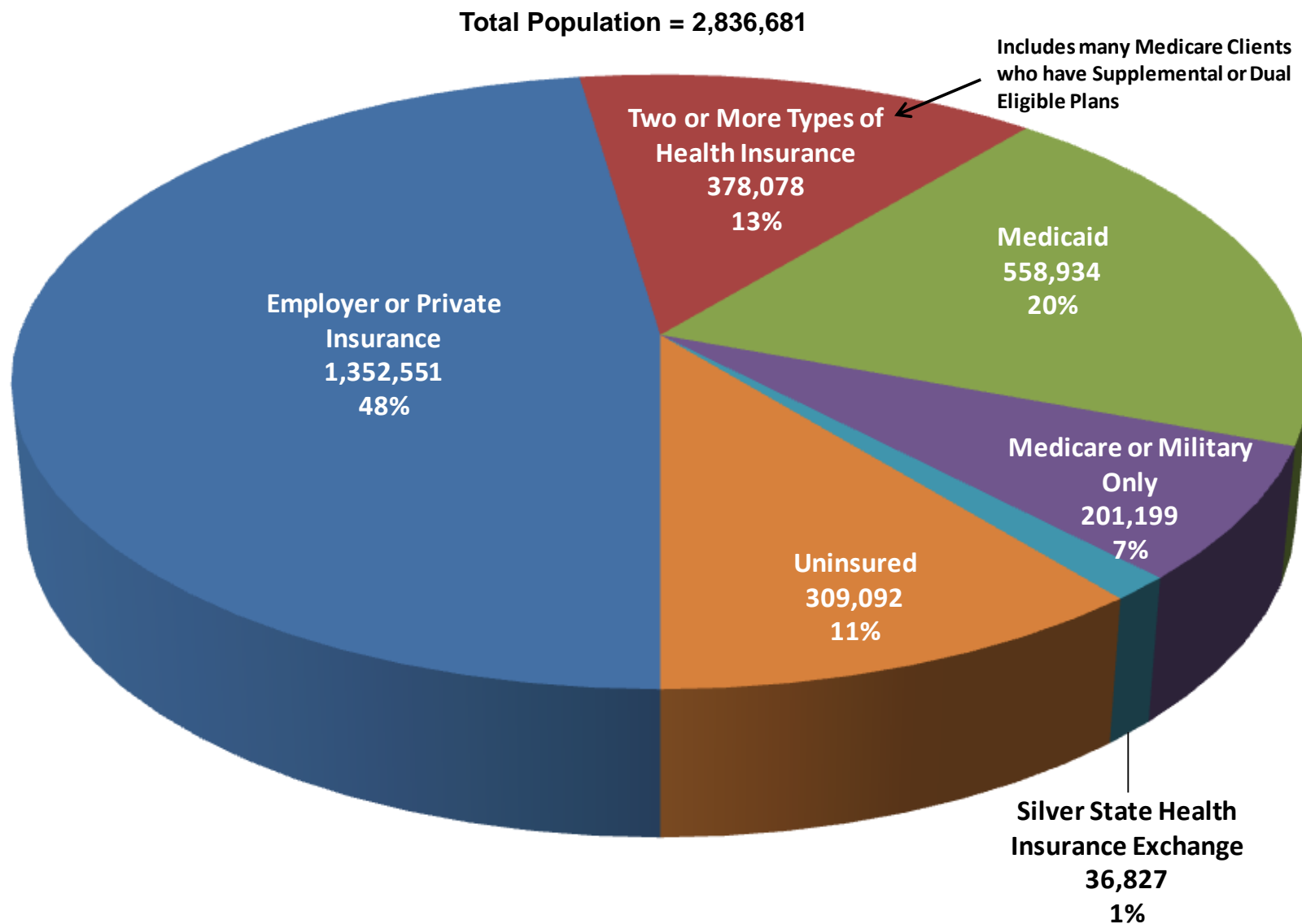
AFFORDABLE CARE ACT AND MEDICAID EXPANSION

Comparison – Medicaid Recipients and Medicaid without ACA Expansion



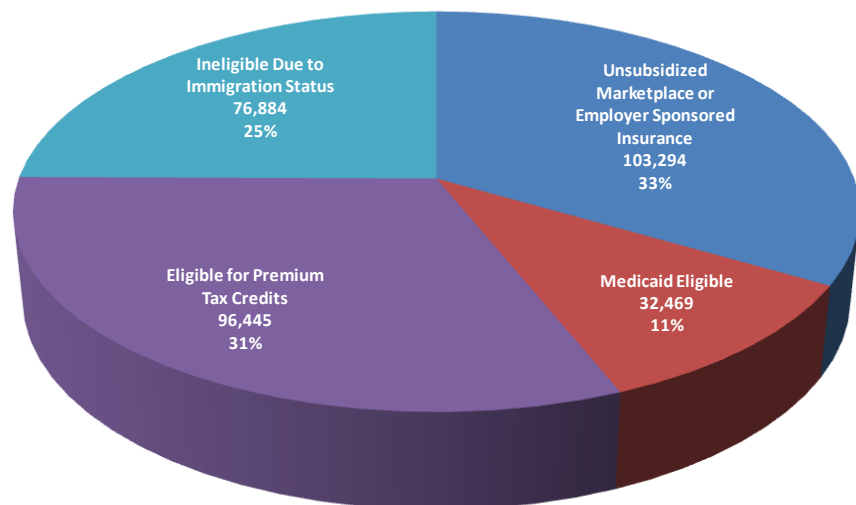
Note: This chart represents the Total Medicaid caseload without estimated retroactive cases.

Estimated Insurance Status of All Nevadans as of October 2014



Estimated Eligibility for Coverage among Currently Uninsured Nevadans

With ACA and Medicaid Expansion



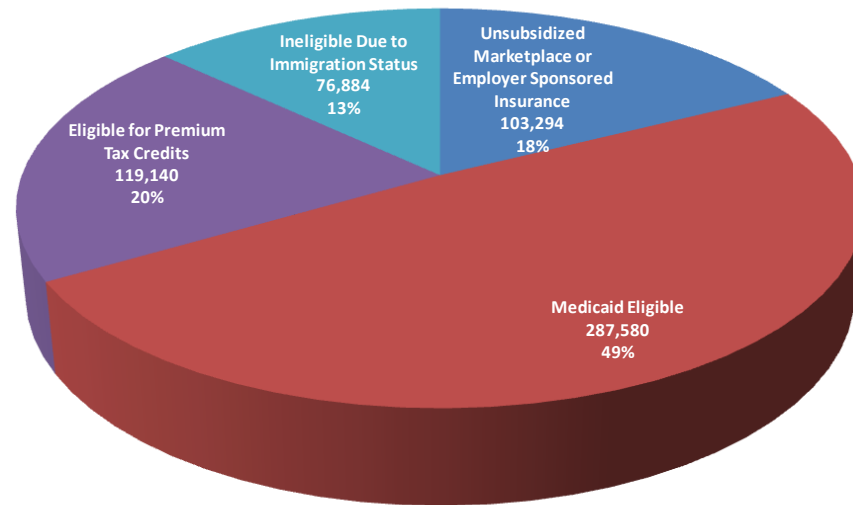
309,092 Uninsured

Uninsured Rate

Non-Elderly Nevadans = 12%

All Nevadans = 11%

Without Medicaid Expansion



586,898 Uninsured

Uninsured Rate

Non-Elderly Nevadans = 24%

All Nevadans = 21%